

Town of Charlestown

PO Box 385 Charlestown, NH 03603 Phone: (603) 826-4400 Fax: (603) 826-3709

Application For Employment

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Personal Information									
Last	First	MI	SSN#	Email					
Street Address	City	ST	Zip	Home Phone	Mobile Phone				
Are you prevented from lawfully being employed in this country because of Visa or Immigration Status? <i>Proof of citizenship or immigration status will be</i>		Are you 18 or older?							
required upon employment		Are you currently on "lay-off" status and subject to recall?							
Do any of your friend or relatives, other than spouse, work here?		Are you currently employed?							
Branch Military Service? ☐ Yes ☐ No		Are you a veteran? Yes No War							
What position are you applying for?	How did you hear about this position?								
Expected Hourly Rate	Expected Weekly Earnings	Date Available							
Prior Work Experience									
	Current or Most Recent	Prior		Prior					
Employer									
Address									
City, ST, ZIP									
Telephone									
Name of Immediate Supervisor									
Dates of Employment	From To	From	То	From	То				
Position/Job Title									
Pay									
Reason for Leaving									
May We Contact	Yes No	Yes	No	Yes	No				
Education									
	Name/Location	Last Year Complete		Degree	Major or Emphasis				
High School		9 10	11 12						
College/University		1 2	2 3 4						
Trade School									
Other									



Town of Charlestown

PO Box 385 Charlestown, NH 03603 Phone: (603) 826-4400 Fax: (603) 826-3709

Application For Employment

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Describe any		renticeship, skills and extra-c y be helpful to us in consider	urricular activies or any additioning your application.	nal
	, , , , , , , , , , , , , , , , , , ,	, 20 11010111111111111111111111111111111		
	Describe any job-relate	d training received in the Uni	tad States military	
	Describe any job-relate	d training received in the On	ted States minitary.	
	List professional, tra	de, business or civic activies	and offices held.	
You may exc	•	gender, race, religion, national origin, age, a		
		Personal References		
	Reference 1	Reference 2	Reference 3	
Name	Reference 1	Neierence 2	Reference 5	
Name				
Address				
City, ST, ZIP				
Telephone				
		Additional Information		
	Depending on the position vo	Additional Information	inal background chock	
	Depending on the position yo	u are apply for, you may be subject to a crin	inal background check.	
Disclaimor Dusianias L		u are apply for, you may be subject to a crin Applicant's Statement		
	hereby certify that the above informat	u are apply for, you may be subject to a crin Applicant's Statement ion, to the Signature:	ninal background check. Date:	
best of my knowledge, is		u are apply for, you may be subject to a crin Applicant's Statement ion, to the of this		